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| Un | | | | persons are requi | | | abnu noitamo | | | |
|---|---|---|------------|---------------------------------------|-----------------|--------------------|---------------|------------|-------------------------------|------------------------|
| | PAT | ENT APPLIC | | FEE DETE | | N RECORD | | Applica | 2 H | moer |
| CLAIMS AS FILED - PART I (Column 1) (Column 2) | | | | | | SMALL (| NTITY | OR. | OTHER THAN OR SMALL ENTITY | |
| FOR NUMBER FIL | | | R FILED | NUMBER EXTRA | | RATE | FEE | | RATE | FEE |
| BASIC FEE (37 CFR 1.16(a)) | | | | | | | 5 | OR | | s |
| | AL CLABAS OFR 1.16(c)) | | minus 20 | | | X 5= | | OR | ×3 | |
| | PENDENT CLASS FR 1.16(b)) | AS | minus 3 | | | x s | | OR | x s= | |
| MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1,16(d)) | | | | | | +3= | | OR | +5 | |
| " If the difference in column 1 is less than zero, enter "O" in column 2. TOTAL OR TOTAL | | | | | | | TOTAL | | | |
| | | LAIMS AS AMI | | | | | | - | | |
| 7 | 2210 | (Cotumn 1) | | (Column 2) | (Column 3) | SMALL I | ENTITY | OR | | R THAN ENTITY |
| 4 | 1919 | CLAIMS | | HIGHEST | PRESENT | | ADDi- | 1 | | |
| - | | REMAINING AFTER AMENOMENT | | NUMBER PREVIOUSLY PAID FOR | EXTRA | RATE | TIONAL FEE | | RATE | ADDI- TIONAL FEE |
| ENDMENT | Total (37 CFR 1.1804) | · ? | Minus | 20 | • / | x s= | | OR. | x s= | |
| Z | independent (37 CFR 1.19(56) | ·3 | Minus | 7 | • / | x s= | | OR | x 8_/- | |
| Æ | FIRST PRESENT | ATION OF MULTIPU | E DEPENDS | ENT CLAIM (37 CF | R 1,16(d)) | +5= | | OR | / | |
| | | | | | | TOTAL ADD'L FEE | | OR | TOTAL ADD'L FEE | |
| 2 | 122/05 | (Column 1) | | (Column 2) | (Column 3) | | | • | | |
| 8 | - | CLAIMS REMAINING | | HIGHEST | PRESENT | RATE | ADDI- | | RATE | ADDI- TIONAL |
| FN | | AFTER AMENDMENT | | PREVIOUSLY PAID FOR | EXTRA | | TIONAL FEE | 1 | <u></u> | FEE |
| AMENDMENT | Total profit 1.16(2) | . 9 | Minus | 20 | <u>·</u> | x 5 • | | OR | x 5 • | |
| | Independent OF OFR 1.18(bit) | . 4 | Minus | 4 | • | x s= | | OR | x s o | |
| ৰ | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(0)) | | | | | +8= | | OR | +1 | |
| | | | | | | TOTAL ADD'L FEE | | /09 | TOTAL ADD'L FEE | |
| 3 | 3-27-0 | (Column 1) | | (Cotumn 2) | (Calumn 3) | | | _/) | | |
| ပ | | CLAIMS REMAINING | | HIGHEST NUMBER | PRESENT | RATE | ADD: | | RATE | ADDI- TIONAL |
| Z | | AFTER AMENDMENT | | PREVIOUSLY PAID FOR | | · | FEE | ! \ | <u> </u> | FEE |
| ENDMENT | Total promisso | 7 | Minus | 20 | • | xs= | | OR. | x & | _ |
| Į Į | Independent G7 CFR 1.16(b) | 3 | Minus | 1 4 | - \ | x s= | | OR | x s | |
| A | FIRST PRESENT | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (17 CFR 1.16(d)) | | | | | | OR | <u> </u> | |
| TOTAL ADOL FEE OR ADOL FEE | | | | | | | | | | |
| | ot 16 can "Liberari | M. mhar Drawinset | v Paid For | y in column 2, wri ' IN THIS SPACE | G IESS VIEN ZV. | eme a. | | | | |
| ** If the T-lighest Number Previously Paid For [*] IN THIS SPACE is tess then 20, enter "20". *** If the T-lighest Number Previously Paid For [*] IN THIS SPACE is tess than 3, enter "3". *** The T-lighest Number Previously Paid For [*] (Total or Independent) is the highest number found in the appropriate box in column 1. | | | | | | | | | | |

The Trighest Number Previously Paid For" (Total or Independent) is the Nighest number found in the appropriate box in column 1.

This collection of Information is required by 37 CFR 1,16. The Information is required to obtain or retain a benefit by the public which is to tile (and by the USPTO to process) an application. Confidentiatly is governed by 35 U.S.C. 122 and 37 CFR 1,14. This collection is estimated to take 12 minutes to complete application from to the USPTO. Time will vary depending upon the Individual case. Any comments including gathering, preparing, and submisiting the completed application from to the USPTO. Time will vary depending upon the Individual case. Any comments on the enount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Tradement Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS, SEND 10: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, cell 1-800-PTO-9199 and select option 2.